# Case 05-50095-ee Doc 277 Filed 08/28/06 Entered 08/29/06 11:45:42 Desc Main Document Page 1 of 33 CHAPTER 11

Case Name	Daleson Ent	erprises, LL	C d/b/a Jones C	ounty Res	st Home	
Case Number	05-50095	For Period	July 1	to	July 31	2000 1107 280611 1:24 CHARLENT LINETTY
the following f	forms unless the	United State		aived the re		otor must attach each of writing. File with the PUTY
Form Attached	Previou Waived	-	REQUIRI	ED REPOI	RTS/DOCUM	IENTS
(mark only one	e - attached or	waived)				
{X}	{ }		Comparat	ive Balanc	e Sheet (FOR	M 2-B)
{X}	{ }		Profit and	Loss State	ement (FORM	1 2-C)
{X}	{ }		Cash Rece	eipts and D	isbursements	Statement (FORM 2-D)
{X}	{ }		Supportir	ng Schedul	es (FORM 2-	E)
{X}	{ }		Narrative	(FORM 2	-F)	
{X}	{ }				ement(s) and lance for all A	Reconciliations of Bank Account(s)
are true and cor		of my knowle		Operating	Daleso	n Enterprises, LLC Jones County Rest Home
			By:**	ı	Buy	Dantem
			Position:	,	Membe	- Te
			Name of prej	parer:	Sandy	Lindsey, CFO
			Telephone N	o, of Prepa	rer 601-75	8-1989

<sup>\*</sup> both debtors must sign if a joint petition \*\* for corporate or partnership debtor

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CASE NUMBER:	05-50095	

### COMPARATIVE BALANCE SHEET

ASSETS:	Month						
CURRENT ASSETS:	01/31/06	02/28/06	3/31/06	4/30/06	5/31/06	6/30/06	7/31/06
Cash	342,928	484,792	493,990	481,860	474,009	493,145	462.635
Accounts Receivable, Net	491,880	309,586	285,252	284,454	283,999	259,578	259,578
Inventory, at lower of cost or market	0	0	0	0		0	0
Prepaid expenses & deposits	0	0	0	0		0	0
Other	620,268	620,268	620,268	620,268	620,268	620.268	620,268
TOTAL CURRENT ASSETS	1,455,076	1,414,646	1,399,510	1,386,582	1,378,276	1,372,991	1,342,481
PROPERTY, PLANT & EQUIPMENT	254,993	254,993	254,993	254,993	254,993	254,993	254,993
Less Accumulated depreciation	0	0	0	0	0	0	0
NET PROPERTY, PLANT & EQUIPMENT	254,993	254,993	254,993	254,993	254,993	254,993	254.993
OTHER ASSETS  Certificate of Need Cost	715,738	715,738	715,738	715,738	715,738	715,738	715.738
Workers Comp Deposit	94,435	94,435	94,435	94,435	94,435	94,435	94,435
TOTAL OTHER ASSETS	810,173	810,173	810,173	810,173	810,173	810,173	810,173
TOTAL ASSETS	2,520,242	2,479.812	2,464.676	2.451.748	2.443.442	2.438,157	2,407.647

If assets are carried at historical cost on debtor's accounting records and debtor elects to show them as such on the monthly reports, note the change above and include remarks on FORM 2-F (Narrative). All subsequent reports must then carry these assets at that value. Do not use historical cost one month and fair market value the next.

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CASE NUMBER:	05-50095

## COMPARATIVE BALANCE SHEET

Month	Month	Month	Month	Month	Month	Month
01/31/06	02/28/06	3/31/06	4/30/06	05/31/06	6/30/06	7/31/06
0	0	0	0	0	0	0
0	0	0	0	0	0	0
0	0	0	0	0	0	0
0	0	0	0	0	0	0
689,477	689,477	689,477	689,477	689,477	689,477	689,477
1,258,733	1,258,733	1,258,733	1258,733	1,258,733	1,258.733	1,258,733
308,767	308,767	308,767	308,767	308.767	308,767	308,767
77,723	77,723	77,723	77,723	77,723	77,723	77,723
2,334,700	2,334,700	2,334,700	2,334,700	2,334,700	2,334,700	2,334,700
185,542	145,112	129,976	117,048	108,742	103,457	72,947
185,542	145,112	129,976	117,048	108,742	103,457	72.947
2,520.242	2,479.812	2,464,676	2,451.748	2,443,442	2.438.157	2.407.647
	01/31/06 0 0 0 0 689,477 1,258,733 308,767 77,723 2,334,700 185,542	01/31/06     02/28/06       0     0       0     0       0     0       0     0       689,477     689,477       1,258,733     1,258,733       308,767     308,767       77,723     77,723       2,334,700     2,334,700       185,542     145,112       185,542     145,112	01/31/06         02/28/06         3/31/06           0         0         0           0         0         0           0         0         0           0         0         0           689,477         689,477         689,477           1,258,733         1,258,733         1,258,733           308,767         308,767         308,767           77,723         77,723         77,723           2,334,700         2,334,700         2,334,700           185,542         145,112         129,976	01/31/06         02/28/06         3/31/06         4/30/06           0         0         0         0           0         0         0         0           0         0         0         0           0         0         0         0           689,477         689,477         689,477         689,477           1,258,733         1,258,733         1,258,733         1258,733           308,767         308,767         308,767         308,767           77,723         77,723         77,723         77,723           2,334,700         2,334,700         2,334,700         2,334,700           185,542         145,112         129,976         117,048	01/31/06         02/28/06         3/31/06         4/30/06         05/31/06           0         0         0         0         0           0         0         0         0         0           0         0         0         0         0           0         0         0         0         0           689,477         689,477         689,477         689,477         689,477           1,258,733         1,258,733         1,258,733         1,258,733         1,258,733           308,767         308,767         308,767         308,767         308,767           77,723         77,723         77,723         77,723         77,723           2,334,700         2,334,700         2,334,700         2,334,700         2,334,700           185,542         145,112         129,976         117,048         108,742	01/31/06         02/28/06         3/31/06         4/30/06         05/31/06         6/30/06           0         0         0         0         0         0         0         0           0         0         0         0         0         0         0         0         0           0

CASE NAME:	Case 05-50095-ee Dareson Enterprises,	Poe 2767a/ Files	1,08/28/06 ment Pac	Entered 08/29/06 ge 4 of 33	11:45:42	Desc Mair

CASE NUMBER:	05-50095
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## PROFIT AND LOSS STATEMENT

	Filing Date	Month	Month	Month	Month	Month	Month
SEE ATTACHED		02/28/06	3/31/06	4/30/06	5/31/06	6/30/06	7/31/06
NET REVENUE	A TABLE PROPERTY OF	0	0	0	0	0	0
COST OF GOODS SOLD:							
Material							
Labor - Direct	表。或力 图 编译图 1013						
Manufacturing Overhead							
TOTAL COST OF GOODS SOLD:	The second secon	0	0	0	0	0	0
GROSS PROFIT:		0	<u> </u>			0	U
OPERATING EXPENSES:							
Selling and Marketing.		0	0	0	0	0	0
General and administrative (rents, utilities, salaries, etc.)		40,430	15,136	12,928	8.306	5.285	30.510,
Other							
TOTAL OPERATING EXPENSES		40,430	15,136	12,928	8,306	5.285	30,510
INTREST EXPENSE							
INCOME BEFORE DEPRECIATION OR TAXES:	<b>新疆</b>	(40,430)	(15,136)	(12,928)	(8.306)	(5,285)	(30.510)
DEPRECIATION OR AMORTIZATION		0	0	0	0	0	
EXTRAORDINARY EXPENSES *	- - - - - - - - - - - - - -						
INCOME TAX EXPENSE (BENEFIT)							
NET INCOME (LOSS)		(40,430)	(15,136)	(12,928)	(8,306)	(5.285)	(30,510)

<sup>\*</sup>Requires explanation in NARRATIVE (Form 2-F)

Case 05-50095-ee Doc 277 Filed 08/28/06 Entered 08/29/06 11:45:42 Desc Main Page 5 of 33 Document CASE NAME: Daleson Enterprises, LLC d/b/a Jones County CASE NUMBER: 05-50095 Rest Home CASH RECEIPTS AND DISBURSEMENTS STATEMENT For Period July 1 to July 31 , 2006 Cash Reconciliation 1. Beginning Cash Balance (Ending cash balance from last month's report) \$ 493,145 2. Cash Receipts (total Cash Receipts from page 2 of all FORM 2-D's) 0 3. Cash Disbursements (total Cash Disbursements from page 3 of all FORM 2-D's) \$ 30,510 (\$30 adjustment due to journal entry.) 4. Net Cash Flow (30,510)5. Ending Cash Balance (to FORM 2-B) \$ 462,635 CASH SUMMARY – ENDING BALANCE Financial Institution Amount\* 1. Real Estate Account Trustmark 2. Trust Account \$ 460,148 Trustmark 3. Operating and/or Personal Account Trustmark 4. Payroll Account 2,487 5. Tax Account \$ 6. Other Accounts (Specify checking or savings) 7. Cash Collateral Account 8. Petty Cash **TOTAL** (Must Agree with line 5 above) \$ 462,635 \*These amounts should be equal to the previous month's balance for the account plus this month's receipts less this month's disbursements. ADJUSTED CASH DISBURSEMENTS Cash disbursements on Line 3 above less inter-account transfers and UST fees paid \$ 30,510

FORM 2-D

Page 1 of 4

01/04

\*NOTE: This amount should be used

to determine UST quarterly fees due

and agree wit Form 2-D, page 2 of 4

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CASE NAME: Daleson Enterprises, LLC d/b/a Jones County

4<sup>th</sup> Quarter

CASE NUMBER:

05-50095

Rest Home

## QUARTERLY FEE SUMMARY

		MONTH ENDED	July 2006	
Payment Date January February March	Cash Disbursements * \$ 274,900 \$ 42,376 \$ 14,295	Quarterly Fee Due	Check No.	Date
Total I <sup>st</sup> Quarter	\$ 331,571	\$ 3,750		
April May June	\$ 12,196 \$ 7,851 \$ 6,594	- - -		
Total 2 <sup>nd</sup> Quarter	\$ 26,641	\$ 500		
July August September Total 3 <sup>rd</sup> Quarter	\$ 30,510 \$ \$	\$		
October November July Total	\$ \$ \$	- - -		

### FEE SCHEDULE

	~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~	
DISBURSE	MENT CATEGORY	QUARTERLY FEE DUE
Less than	\$15,000.00	\$250
\$15,000	- \$74,999.99	\$500
\$75,000	- \$149,999.99	\$750
\$150,000	- \$224,999.99	\$1,250
\$225,000	- \$299,999.99	\$1,500
\$300,000	- \$999,999.99	\$3,750
\$1,000,000	- \$1,999,999.99	\$5,000
\$2,000,000	- \$2,999,999.99	\$7,500
\$3,000,000	- \$4,999,999.99	\$8,000
\$5,000,000	, ,	\$10,000

Note that a minimum payment of \$250 is due each quarter even if no disbursements are made in the case during the period.

<sup>\*</sup> Note: should agree with "adjusted cash disbursements" at bottom of Form 2-D, Page 1 of 4. Disbursements are net of transfers to other debtor in possession bank accounts and net of payments of prior period quarterly fees.

Case Name:	Daleson Enterprises d/b/a Jones County Rest Home	
Case Number:	05-50095	
	CASH RECEIPTS AND DISBUR	SEMENTS STATEMENT
(This form sho	ould be completed for each type of account listed during the mo	ed on page 1 of Form 2-D that the debtor maintained onth.)
	For PeriodJuly l to	_July 31, 2006
	Account Name:Jones County Rest Home Operating Account CASH RECEIPTS.	
	(attach additional sheet	s as necessary)
Date	Description (Source)	Amount .
SEE AT	ГАСНЕО	

Total Cash Receipts

\$\_\_\_0\_\_

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Case Name:	Daleson Enterprises d/b/a Jones County Rest Home	
Case Number:	05-50095	
	CASH RECEIPTS AND DISE	BURSEMENTS STATEMENT
(This form sho	- · · · · · · · · · · · · · · · · · · ·	listed on page 1 of Form 2-D that the debtor maintained e month.)
	For PeriodJuly 1 to	July 31, 20_06
	Account Name:_JCRH Old Acct. Paya	uble_ Account Number:_430-715-3379
	CASH RECEIP	TS JOURNAL
	(attach additional s	heets as necessary)
Date	Description (Source)	Amount
SEE AT	TACHED	

Total Cash Receipts

\$\_\_0\_

01/04

		01/01
Case Name:	Daleson Enterprises d/b/a Jones County Rest Home	
Case Number:	05-50095	
	CASH RECEIPTS AND DISBURSEMENTS	S STATEMENT
(This form sh	ould be completed for each type of account listed on page during the month.)	1 of Form 2-D that the debtor maintained
	For PeriodJuly 1 toJuly 31,	20_06
	Account Name: JCRH New Accts. Payable Account N	Tumber:480-009-6685
	CASH RECEIPTS JOURNAL	<u></u>
	(attach additional sheets as necess	ary)
Date	Description (Source)	Amount .
SEE AT	TACHED	
	Total Cash Receipts \$0	)

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01/04

Case Name:	Daleson Enterprises d/b/a Jones County Rest Home	
Case Number:	05-50095	
	CASH RECEIPTS AND DIS	BURSEMENTS STATEMENT
(This form sho		nt listed on page 1 of Form 2-D that the debtor maintained he month.)
	For PeriodJuly 1	toJuly 31, 20_06
	Account Name:_JCRH Payroll	Account Number:_480-009-6693
	<u>CASH RECE</u>	IPTS JOURNAL
	(attach additional	sheets as necessary)
Date	Description (Source)	Amount
SEE AT	ГАСНЕО	

Total Cash Receipts

\$\_\_0

Case 05-50095-ee Doc 277 Filed 08/28/06 Entered 08/29/06 11:45:42 Desc Main Document Page 11 of 33

01/04

Case Nam	Daleson Enterprises d/b/a Jones County Rest Home
Case Num	per: 05-50095
	CASH RECEIPTS AND DISBURSEMENTS STATEMENT
(This for	m should be completed for each type of account listed on page 1 of Form 2-D that the debtor maintained during the month.)
	For PeriodJuly 1 toJuly 31, 20_06
	Account Name:_JCRH Resident Trust _ Account Number:_480-009-6719
	CASH RECEIPTS JOURNAL
	(attach additional sheets as necessary)
Date	Description (Source)Amount
SE	E ATTACHED

Total Cash Receipts

\$\_0\_

## Case 05-50095-ee Doc 277 Filed 08/28/06 Entered 08/29/06 11:45:42 Desc Main Document Page 12 of 33 Daleson Enterprises d/b/a Jones Case Name: County Rest Home 05-50095 Case Number: CASH RECEIPTS AND DISBURSEMENTS STATEMENT (This form should be completed for each type of account listed on page 1 of FORM 2-D that the debtor maintained during the month.) For Period July 1 to July 31, 2006 Account Name: Jones County Rest Home Account Number: \_480-009-6701 Operating CASH DISBURSEMENTS JOURNAL (attach additional sheets as necessary) Description (Purpose)\* Amount Check No. Payee Date SEE ATTACHED

\*Identify any payments to professionals, owners, partners, shareholders, Officers, director or any insiders and all adequate protection payments Ordered by the court with an asterisk or highlighting. Any payments made as a result of a court order, should indicate the order date.

\$\_\_0\_

Total Cash Disbursements

Case Name:	Daleson Enterprise County Rest Home				01/04
Case Number:	05-50095				
	(This form	CEIPTS AND DIST should be complet ORM 2-D that the	ed for each type of	account listed	
	For	PeriodJuly 1	to _July 31,	2006	
	Account Name: _	_JCRH Old Acct. P	ay Account Nu	ımber: _430-715-3349	
		CASH DISBURS! (attach additional	EMENTS JOURN. shects as necessar		
Date Che	eck No. Payee	Descripti	on (Purpose)*	Amount	
SEE A	TTACHED				

Total Cash Disbursements

\$ 408

<sup>\*</sup>Identify any payments to professionals, owners, partners, shareholders, Officers, director or any insiders and all adequate protection payments Ordered by the court with an asterisk or highlighting. Any payments made as a result of a court order, should indicate the order date.

7/1/2006 Through 7/31/2006

			/ I///OUV I//IOUgii	, , ,	9		
/21/2006 Date	Account	Num	Description	Memo	Category	Clr_	Page Amount
7/11/	.DO NOT UE	EBIT	ACH DEBIT T			R	<b>-</b> 298.39
7/17/	.DO NOT U	EBIT	ACH DEBIT M			R	-109.59
TOTAL 7/1	/2006 - 7/31/	2006					-407.98
			ייכ	OTAL INFI	LOWS		0.00
			TO	OTAL OUT	TLOWS		-407.98
			NI	ET TOTAL			-407.98

Case Name:		Enterprises d/b/ Rest Home	a Jones				
Case Number:	05-50095	5					
		(This form shown age 1 of FORM	ald be complet I 2-D that the	SBURSEMENT ted for each type debtor maintaine to _July 31_	of account listened during the m	ed	
	Account N			able Accoun		0-009-6685	
		CAS	SH DISBURS	EMENTS JOUR	RNAL		
Date Cho	eck No.	Payec	Descripti	on (Purpose)*		Amount	
SEE A	TTACHEL						
				Total Cash D	Disbursements	\$30,132.05	<del></del>

<sup>\*</sup>Identify any payments to professionals, owners, partners, shareholders, Officers, director or any insiders and all adequate protection payments Ordered by the court with an asterisk or highlighting. Any payments made as a result of a court order, should indicate the order date.

7/1/2006 Through 7/31/2006

8/21/2006			/1/2006 inrough .		G-1	67 J	Page
Date	Account	Num	Description	Memo	Category		Amount.
7/14/2	AP NEW JCRH3	320	LARRY FORTE				-2,285.00
7/14/	AP NEW JCRH3	321	LARRY RUSSELL				-2,285.00
7/14/	AP NEW JCRH3	322	LARRY FORTE			R	-153.60
7/14/7	AP NEW JCRH3	323	LARRY RUSSELL			R	-153.60
7/26/	AP NEW JCRH3	326	DEREK A. HE	\tty			-22,112.50
7/26/7	AP NEW JCRH3	327	OFFICE OF T	"			-500.00
7/28/	AP NEW JCRH3	328	DEREK A. HE	Atty			-2,307.35
7/31/7	AP NEW JCRH3	329	SOUTH CENTR				-335.00
TOTAL 7/1/2	2006 - 7/31/	2006					-30,132.05
			TC	OTAL INFL	OWS		0.00
			TO	TAL OUTF	LOWS		-30,132.05
			NE	TOTAL			-30,132.05

Case Name:	Daleson Enterprises d/ County Rest Home	/b/a Jones	
Case Number:	05-50095		
	(This form sh	CIPTS AND DISBURSEMENTS STAT ould be completed for each type of account 2-D that the debtor maintained during	int listed
	For Per	iodJuly 1 to _July 31, 2006	
	Account Name: _	JCRH Payroll Account Number: _48	30-009-6693
		ASH DISBURSEMENTS JOURNAL attach additional sheets as necessary)	
Date Che	ck No. Payee	Description (Purpose)*	Amount
SEE A	TTACHED		
		Total Cash Disbursen	nents \$0

\*Identify any payments to professionals, owners, partners, shareholders, Officers, director or any insiders and all adequate protection payments Ordered by the court with an asterisk or highlighting. Any payments made as a result of a court order, should indicate the order date.

Case Name:	Daleson Enterprises d County Rest Home	/b/a Jones	
Case Number:	05-50095		
	(This form shorn page 1 of FOF	EIPTS AND DISBURSEMENTS ST hould be completed for each type of ac RM 2-D that the debtor maintained duriodJuly 1 to _July 31, 20	ecount listed ring the month.)
	C	H Resident Trust Account Number ASH DISBURSEMENTS JOURNAL (attach additional sheets as necessary)	
Date Che	eck No. Payee	Description (Purpose)*	Amount .
SEE A	TTACHED		
		Total Cash Disbur	rsements \$0

\*Identify any payments to professionals, owners, partners, shareholders, Officers, director or any insiders and all adequate protection payments Ordered by the court with an asterisk or highlighting. Any payments made as a result of a court order, should indicate the order date.

CASE NAME:	Daleson Enterprises d/b/a Jones	CASE NUMBER:	05-50095
	County Rest Home		

## SUPPORTING SCHEDULES

For Period \_\_\_July 1\_\_\_ to \_July 31\_\_\_, 20 06\_\_\_\_\_

## POST-PETITION ACCOUNTS PAYABLE AGING REPORT

TYPE	INCURRED	DUE	0-30	31-60	61-90	OVER 90
FITW	0	0	\$	\$	\$	
FICA	0	0				
FUTA	0	0				
SITW	0	0				
SUTA	0	0				
OTHER TAX						
TRADE						
PAYABLES						
OTHER	0	0				
Retirement	0	0				
Accrued PR	0	0				
Bonus	0	0				
(70m / F 0						
TOTALS	0	0	\$	\$	\$	\$

FORM 2-E Page 1 of 3

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CASE NAME:

Daleson Enterprises, LLC dba Jones Cty Rest

CASE NUMBER:

05-50095

Home

#### SUPPORTING SCHEDULES

For Period July 1 To July 31 2006

### INSURANCE SCHEDULE

Туре	Carrier/Agent	Coverage (\$)	Date of Expiration	Premium Paid
Workers' Compensation	MSHCA	\$100,000	1/1/06	NO
General Liability	CULIC	\$500,000	10/7/06	CANCELLED
Property (Fire, Theft)	Fox Everett	\$500,000	8/30/06	CANCELLED
Vehicle				
Other (list):				

<sup>(1)</sup> Attach copy of certificate of insurance or declaration page of policy for any coverage renewed or replaced during the current reporting month.

<sup>(2)</sup> For the premium paid column enter "yes" if payment of premium is current or "no" if premium payment is delinquent. If "no", explain on Form 2-F, Narrative.

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01/04

	Daleson Enterprises, LLC	dba Jones Cty Rest	CASE NUMBER:	05-50095	
		NARRATIVE	STATEMENT		
		NAICATIVE	DIZELENIES, VI		
	For Period	July 1t	oJuly 31	, 20 06	
Please provide a brief description of the significant business and legal action by the debtor, its creditor or the court during the reporting period. Comments should include any change in bank accounts, explanation of extraordinary expenses, and purpose of any new post-petition financing. Comments should also include debtor's efforts during the month to rehabilitate the business and to develop a plan.					
					2510
			<u> </u>		
<u> </u>					
	- MIN			· · · · · · · · · · · · · · · · · · ·	

AP NEW JCRH 8/8/2006

Page 1

#### Reconciliation Summary

BANK STATEMENT CLEARED TRANSACTIONS:			
Previous Balance:			495,333.07
Checks and Payments Deposits and Other Credits Service Charge Interest Earned	6 2 0 0	Items Items Items Items	-9,447.20 0.00 0.00 0.00
Ending Balance of Bank Statement:			485,885.87
YOUR RECORDS UNCLEARED TRANSACTIONS: Cleared Balance:			485,885.87
Checks and Payments Deposits and Other Credits	16 0	Items Items	-37,386.74 0.00
Register Balance as of 7/31/2006: Checks and Payments Deposits and Other Credits	1 0	Item Items	448,499.13 -292.59 0.00
Register Ending Balance:			448,206.54

Well AF Bolonce 3,042,13
New AF Boloney 448499,13
+51,541,24

AF NEW JCRH 8/8/2006

Uncleared Transaction Detail up to 7/31/2006

Date	Num	Payee	Memo	Ca	ategory	Clr	Amount
Uncleared	Checks	and Payments					
5/11/2005 7/13/2005 8/12/2005 9/14/2005 10/14/ 11/15/ 12/15/ 1/10/2006 1/12/2006 2/15/2006 7/14/2006 7/14/2006 7/26/2006 7/26/2006 7/28/2006 7/31/2006	2296 2556 2658 2821 2962 3092 3180 3235 3243 3280 3321 3326 3327 3328 3329	GARY D. THRASH WILLIAM G. CLARK ELLEN GRAVES JOHN D. MCCORMICK LARRY FORTENBERRY LARRY FUSSELL DEREK A. HENDERS OFFICE OF THE US SOUTH CENTRAL RE	-	GARNIS	ТИЗМН		-457.89 -800.00 -800.00 -800.00 -800.00 -800.00 -800.00 -800.00 -20.00 -1,484.00 -2,285.00 -2,285.00 -22,112.50 -500.00 -2,307.35 -335.00
Total Uncl	eared (	Checks and Payments		16	Items		-37,386.74
	-	cs and Other Credits Deposits and Other Cr	redits	0	Items		0.00
Total Uncl	eared :	[ransactions		16	Items		-37,386.74

Page 2



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## Document Page 24 of 33 Small Business Checking

Page 1 of 3

Statement Period From 7/01/2006 To 7/31/2006 Account Number 480-009-6685

6 Images Included

### Lillalanta Haliada Humilla halida halida halida halid

DALESON ENTERPRISE LLC DBA JONES COUNTY REST HOME ACCT PAYABLE DEBTOR IN POSSESSION CHAP 11 CASE NO 05-50095 PO BOX 345 SUMRALL MS 39482-0345

#### Customer Service:

1-800-243-2524 or 1-601-961-6000 Automated Response: 24 hours day Representative, Mon. - Fri., 8am-5pm; Sat. 9am-7pm

For questions or to receive a Trustmark Access Number for use with automated services, call during Representative hours and choose option '0'.

Website address: www.trustmark.com



## Summary

Description	Transactions	Amount
Balance last statement		495,333.07
Deposits and other credits		+ .00
Checks and other withdrawals	6	- 9,447.20
Service charges		00
Balance this statement		\$485.885.87

Note: Your lowest balance during this period was \$485,885.87, and it occurred on 7/20/2006.



## Checks and Other Withdrawals

#### Checks Paid

Number of images included in this statement: 6

Total of Checks Paid: \$9,447.20

<u>Number</u>	<u>Date Paid</u>	Amount	Number	Date Paid	Amount	Number	Date Paid	Amount
3303	7/3	2,285.00	<u>3316 #</u>	7 /3	2,285.00	3322#	7 /20	153. <u>60</u>
3311#	7/3	2,285.00	3317	7_/5	2,285.00	3323	7 /20	153.60

# Indicates a break in the check number sequence before this check.

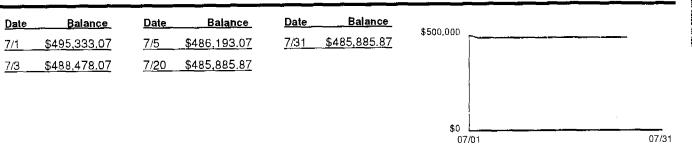
Represents an unnumbered check or a non-check item.



Statement Period From 7/01/2006 To 7/31/2006 Account Number 480-009-6685



## **Daily Balance History**

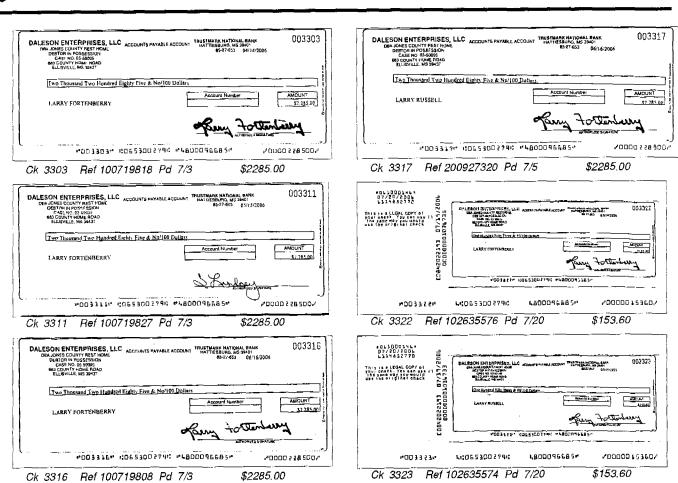


Your Balance this Period Bajance



## **Check Images**

Note: The items below are true and correct copies of the original items which have been photographically reproduced by the bank



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DO NOT USE JCRH AP 8/9/2006

Page 1

#### Reconciliation Summary

BANK STATEMENT CLEARED TRANSACTIONS:		
Previous Balance:		3,450.11
Checks and Payments Deposits and Other Credits Service Charge Interest Earned	2 Items 0 Items 0 Items 0 Items 0 Items	-407.98 0.00 0.00 0.00
Ending Balance of Bank Statement:		3,042.13
YOUR RECORDS UNCLEARED TRANSACTIONS:  Cleared Balance:		3,042.13
Checks and Payments Deposits and Other Credits	0 Items 0 Items	0.00
Register Balance as of 7/31/2006: Checks and Payments Deposits and Other Credits	0 Items 0 Items —	3,042.13 0.00 0.00
Register Ending Balance:		3,042.13

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DO NOT USE JCRH AP 8/9/2006

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Uncleared Transaction Detail up to 7/31/2006

Date	Num	Payee	Memo	Ca	ategory	Clr	Amount
Uncleared	Checks and	l Payments					
Total Unc	leared Chec	ks and Payments		0	Items		0.00
Uncleared	. Deposits a	and Other Credits					
Total Unc	leared Depo	sits and Other Credits		0	Items	<u></u>	0.00
Total Unc	leared Tran	sactions		0	Items		0.00



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## Small Business Checking

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Statement Period From 7/01/2006 To 7/31/2006 Account Number 430-715-3349

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DALESON ENTERPRISE LLC DBA JONES COUNTY REST HOME ACCOUNTS PAYABLE PO BOX 345 SUMRALL MS 39482-0345

#### Customer Service:

1-800-243-2524 or 1-601-961-6000 Automated Response, 24 hours/day Representative: Mon. - Fri., 8am-8pm; Sat. 9am-7pm

For questions, or to receive a Trustmark Access Number for use with automated services, call during Representative hours and choose option '0'

Website address: www.trustmark.com



## Summary

Description	Transactions	Amount	
Balance last statement		3,450.11	
Deposits and other credits		+ .00	
Checks and other withdrawals	22	- 407.98	
Service charges		00	
Balance this statement		\$3.042.13	

Note: Your lowest balance during this period was \$3,042.13, and it occurred on 7/17/2006.



## **Checks and Other Withdrawals**

#### Other Electronic Transactions

e	Amount	Description
7/11	298.39	ACH DEBIT AXA EQUITABLE INS. PAYMT PPD 22009572334903
7/17	109.59	ACH DEBIT METLIFE PAYMENT PPD 10000771914

Total of Other Electronic Transactions: \$407.98

National Bank

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Desc Main Small Business Checking

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e generalization of a representation from

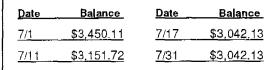
Statement Period From 7/01/2006 To 7/31/2006

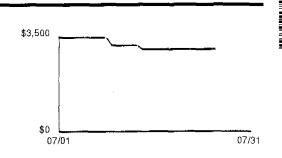
**Account Number** 430-715-3349





## **Daily Balance History**





Your Balance this Period - Balance

### Reconciliation

This section is provided to help you balance your bank statement. Checks and Other Withdrawals Bank Balance Check Number Amount Shown on \$3.042.13 outstanding -Not charged to account this statement Add + Deposits not crédited to this statement Total Subtract -Checks and Other Withdrawals Outstanding Balance = Total Checks and This balance should agree with your checkbook Other Withdrawals outstanding balance after deducting service charges and adding interest (if any) shown on this statement for previous month.



## Customer News

PR NEW JCRH 8/21/2006 Page 1

2,487.23

Reconciliation Summary

BANK STATEMENT CLEARED TRANSACTIONS:			
Previous Balance:			3,635.84
Checks and Payments Deposits and Other Credits Service Charge Interest Earned		Items Items Items Items	0.00 0.00 0.00 0.00
Ending Balance of Bank Statement:			3,635.84
YOUR RECORDS UNCLEARED TRANSACTIONS:  Cleared Balance:	,		3,635.84
Checks and Payments		Items	-1,148.61
Deposits and Other Credits  Register Balance as of 7/31/2006:  Checks and Payments  Deposits and Other Credits	0	1 ( 0111)	2,487.23 0.00 0.00

Register Ending Balance:

PR NEW JCRH 8/21/2006

Uncleared Transaction Detail up to 7/31/2006

Date	Num	Payee	Memo	Ca	tegory	_ Clr	Amount
Uncleared	Checks	and Payments					
1/6/2006 1/6/2006		2021 Kendra Barnett 1878 LINDSEY SAN		Salary			-387.57 -761.04
Total Uncl	leared C	Checks and Payments		2	ltems		-1,148.61
Uncleared	Deposit	s and Other Credits					
Total Uncl	eared D	eposits and Other Cred	lits	0	Items		0.00
Total Uncl	eared T	ransactions		2	Items		-1,148.61

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Statement Period From 7/01/2006 To 7/31/2006 **Account Number** 480-009-6693

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DALESON ENTERPRISE LLC DBA JONES COUNTY REST HOME PAYROLL ACCT DEBTOR IN POSSESSION CHAP 11 CASE NO 05-50095 PO BOX 345 SUMRALL MS 39482-0345

#### Customer Service:

1-800-243-2524 or 1-601-961-6000 Automated Response: 24 hours/day Representative Mon - Fri. 8am-8pm; Sat. 9am-7pm

For questions, or to receive a Trustmark Access. Number for use with automated services, call during Representative hours and choose option '0'.

- Balance

Website address: www.trustmark.com



## **Summary**

Description	Transactions	<u>Amount</u>
Balance last statement		3,635.84
Deposits and other credits		+ ,00
Checks and other withdrawals		00
Service charges		00
Balance this statement		\$3,635.84

Note: Your lowest balance during this period was \$3,635.84, and it occurred on 7/1/2006.



## **Daily Balance History**

<u>Date</u> 7/1	<b>Balance</b> \$3,635.84	Date         Balance           7/31         \$3,635.84	\$3,700	
			\$0 07/	/01 07/31
				Your Balance this Period

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Statement Period From 7/01/2006 To 7/31/2006 **Account Number** 480-009-6693

### Reconciliation

stmark

National Bank

This section is provided to help you balance your bank statement. Bank Balance Checks and Shown on Other Withdrawals Check Number <u>Amount</u> \$3.635<u>.84</u> this statement outstanding -Not charged to account Add + Deposits not credited to this statement Total Subtract -Checks and Other Withdrawals Outstanding Balance = Total Checks and Other Withdrawals outstanding \$ This balance should agree with your checkbook balance after deducting service charges and adding interest (if any) shown on this statement for previous month.



#### **Customer News**

#### ATM/debit card use outside the United States

If you are traveling to a foreign country and intend to use your debit card, please notify us at 601-949-4462 or 800-844-2000 Ext. 4462.

#### CONSUMER ACCOUNTS ONLY

#### In Case of Error or Questions About Your Electronic Transfer or Direct Deposit

Write or telephone us as soon as you can, if you think your statement or receipt is wrong or if you need more information about a transfer or direct deposit listed on the statement or receipt. We must be notified by you no later than 60 days after we sent the first statement on which the problem or error appeared.

- Tell us your name and account number.
- Describe the error or the transfer you are unsure about, and explain as clearly as you can why
  you believe it is an error or why you need more information.
   Tell us the dollar amount of the suspected error.

We will generally complete our investigation within 10 business days and correct any error promptly. In some cases, an investigation may take longer, but you will have the use of the funds in question after the 10 business days. If we ask you to put your complaint or questions in writing and we do not receive it within 10 business days, we may not credit your account during the investigation.

If we decide that there was no error, we will send you a written explanation within 3 business days after we finish our investigation. You may ask for copies of the documents that we used in our investigation.

For questions or problems relating to your Trustmark Express Card or any electronic fund transfer, call us at 1-601-961-6000 (in the Jackson, Mississippi area) or at 1-800-243-2524 (all other locations). If you prefer you may write us at the following address: Trustmark National Bank

Attn: Customer Contact Center P.O. Box 291 Jackson, MS 39205-0291